Only

PAGE 1 / 17 =

FEC FORM 1			GANIZA				C	Office Use	Only		•
1. NAME OF COMMITTEE (ir	n full)		ck if name anged)	Example: If over the line		12FE	4M5		1		
DSCC	r ruii)	13 011	ariged)	over the ini-	03.						
ADDRESS (number a	nd street)	120 Maryland	Ave NE								
(Check if a is changed											
is changed	۵)	Washington				DC	20	002	-		
		CITY				STATE	•		ZIP C	ODE 🛦	
COMMITTEE'S E-MA	AIL ADDRI	ESS									
(Check if a is changed		compliance	e@dscc.org	1 1 1 1 1	1 1 1 1 1	1 1 1 1	1 1	1 1	1 1	1 1	
is changed	<i>a)</i>	Optional Sec	ond E-Mail Add	dress							
COMMITTEE'S WEB (Check if a is changed	address	www.dscc.org									
2. DATE 0		D / Y Y 22 202	Y Y 2								
3. FEC IDENTIFIC	CATION N	UMBER ▶	Cc	00042366							
4. IS THIS STATEM	MENT	NEW (N)	OR	AM	MENDED (A)						
certify that I have e	examined	his Statement a	nd to the best	of my knowled	ge and belief	it is true, co	orrect and	d compl	ete.		
Type or Print Name	of Treasur	er Wright, Alliso	n, , ,								
Signature of Treasure	ər <i>Wri</i> g	ht, Allison, , ,		[Electro	nically Filed]	Date	03	02	7	202	
NOTE: Submission of	false, error			may subject the ON SHOULD BE				penaltie	s of 2	U.S.C.	§437g.
Office Use				Federal	her information Election Commisse 800-424-9530				FOR		

Toll Free 800-424-9530

Local 202-694-1100

FF	C Form 1 (Revised 02/2009)	Page 2
TYPE (OF COMMITTEE	. 494 =
(a)	This committee is a principal campaign committee. (Complete the candidate information below	<i>I</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
Name o Candida		
Candida Party A	ate Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party	Committee:	(Domogratio
(d)	This committee is a NAT (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Politic	cal Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	onnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	
	Committees Participating in Joint Fundraiser	
	1. FEC ID number	
	2. FEC ID number C	
	3.	
	4.	

FEC Form 1 (Revised (02/2009)	Page 3
Write or Type Committee Name		, age 3
DSCC		
	Drganization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
-		
Colorado Senate Victo		
Mailing Address	120 Maryland Ave NE	
	Washington DC 2000	2
	CITY STATE	ZIP CODE
	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Iden books and records. 	ntify by name, address (phone number optional) and position of the person in	possession of committee
Wright, Alli	ison, , ,	
Full Name	,120 Maryland Ave NE	
Mailing Address		
	Washington , DC , 2000	12
	Washington DC 2000	
Title or Position	CITY STATE	ZIP CODE
Treasurer		224 - 2447
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Wright, Alli of Treasurer	son, , ,	
Mailing Address	120 Maryland Ave NE	
	Washington DC 2000 CITY STATE	2 ZIP CODE
Title or Position Treasurer		224 - 2447

0 . 3	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Pedraja, Elizabeth, , ,	
Mailing Address	120 Maryland Ave NE	
	Washington DC 20002	, 1-1
	CITY STATE Z	IP CODE
Title or Position Assistant Treasu	rer Telephone number 202 - 22	24 - 2447
safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds see or maintains funds. epository, etc. Amalgamated Bank 1825 K Street NW	accounts, rents
Mailing Address		
	Washington DC 20006	
	CITY STATE Z	IP CODE
Name of Bank, D		IP CODE
Name of Bank, D		IP CODE
	epository, etc.	IP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or ((h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
_				
6. N		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Pennsylvania Ser	late 2010		
	Mailing Address	120 Maryland Ave NE		
	Mailing Address			
		Washington	, DC	, 20002
	Relationship:	CITY ▲	STATE A	ZIP CODE A
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
_				
3. D	esignated Agent: Identify	by name, address (phone number – optional)		
— 3. D	esignated Agent: Identify	by name, address (phone number – optional)		
3. D		by name, address (phone number – optional)		
— В. D	Full Name	by name, address (phone number – optional)		
3. D	Full Name	by name, address (phone number – optional)		
	Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
B. D	Full Name	CITY A	STATE A	
8. D	Full Name Mailing Address	CITY A	1	
— Э. В	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
— Э. B	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
— Э. B sa	Full Name Mailing Address TITLE OR POSITION	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
— Э. B sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail ame of Bank,	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
). B sa N	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or malame of Bank, epository, etc	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
— 9. B sa	Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or malame of Bank, epository, etc	CITY A Tele ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). Joint Fundraisin	n Particinant		
7 (9)	1. L L L L L L L L L L L L L L L L L L L		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected House Senate Vic	Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	Mailing Address	120 Maryland Ave NE		
		Washington	DC	20002
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representat	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		
	TITLE OR POSITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
	IIILE OR POSITION		ephone Number	
).	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ne committee deposits	funds, holds accounts, rents
		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Mailing Address			
		I	1 1 1	1 1 1

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). Joint Fundraising	g Participant:		
	1.	FE	EC ID number	C
	2.	FE	EC ID number	C
	3.	FE	EC ID number	C
	4.	FE	EC ID number	C
6.	Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising	Representative	e, or Leadership PAC Sponsor
	Mailing Address	120 Maryland Ave NE		
		Washington	, DC	20002
	Relationship:	CITY A	STATE A	ZIP CODE ▲
			aising Representa	
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
		CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION		STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
	Banks or Other Depositor safety deposit boxes or main Name of Bank,	Telephor ies: List all banks or other depositories in which the con-	STATE ▲ ne Number	
	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	Telephor ies: List all banks or other depositories in which the con-	STATE ▲ ne Number	
	Banks or Other Depositor safety deposit boxes or main Name of Bank,	Telephor ies: List all banks or other depositories in which the con-	STATE ▲ ne Number	
	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	Telephor ies: List all banks or other depositories in which the con-	STATE ▲ ne Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		, , FEC ID	number	
		· · I FEC ID	number	С
2.			number	С
3.			number	C
4.		TEC ID	number	<u> </u>
	Organization, Affiliated Committee, Jo	oint Fundraising Rep	resentative	e, or Leadership PAC Spon
Michigan Senate	Majority Fund			
Mailing Address	120 Maryland Ave NE			
	Washington		DC	20002
Relationship:	CITY A		STATE A	ZIP CODE ▲
П				П въс с
	d Organization Affiliated Committee	Joint Fundraising ptional)	Representa	Leadership PAC S
			Representa	tive Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee		Representa	Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee		Representa	Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – o	ptional)		
esignated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – o	ptional)	Representa	
esignated Agent: Identif Full Name Mailing Address	d Organization Affiliated Committee y by name, address (phone number – o	ptional)	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION AREA OF Other Depositor Afety deposit boxes or mailing and ma	Affiliated Committee by by name, address (phone number – o CITY ries: List all banks or other depositories	ptional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	Affiliated Committee by by name, address (phone number – o CITY ries: List all banks or other depositories	ptional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or m ame of Bank,	Affiliated Committee by by name, address (phone number – o CITY ries: List all banks or other depositories	ptional)	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee by by name, address (phone number – o CITY ries: List all banks or other depositories	ptional)	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected Nevada Senate Vi	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	120 Maryland Ave NE		
		Washington	DC	20002
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected		Fundraising Represent	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	lephone Number	
		wise. List all hamba ay athay danasitaying in which t	ika aammittaa danaai	
	safety deposit boxes or ma		ne committee deposi	is funds, holds accounts, rents
	safety deposit boxes or ma		ne committee deposi	s funds, holds accounts, rents
	safety deposit boxes or ma		ne committee deposi	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		ne committee deposi	is funds, holds accounts, rents
	Name of Bank, Depository, etc.		The committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

Page 10 of 17

5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. **DSCC Chair Victory Fund** 120 Maryland Ave NE Mailing Address 20002 Washington Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address CITY A STATE A ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi r	ig i articipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
California Senate	Victory 2022		
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join y by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
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esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Duckworth Victory Fu	24 Washington Street Suite 101 Foxboro CITY	MA STATE A	02035 ZIP CODE A
3. 4. Lame of Any Connected Organ Duckworth Victory Full Name Lambda Lam	24 Washington Street Suite 101 CITY anization Affiliated Committee	FEC ID number	ve, or Leadership PAC Spon
4. Duckworth Victory Fundame of Any Connected Organ Duckworth Victory Fundame Mailing Address Relationship: Connected Organ C	24 Washington Street Suite 101 CITY anization Affiliated Committee	ndraising Representation MA STATE bint Fundraising Representation	ve, or Leadership PAC Spon
Duckworth Victory Full Name	24 Washington Street Suite 101 CITY anization Affiliated Committee	MA STATE A	02035 ZIP CODE A
Duckworth Victory Full Name	24 Washington Street Suite 101 CITY anization Affiliated Committee	MA STATE A	02035 ZIP CODE A
Mailing Address Relationship: Connected Orgesignated Agent: Identify by Full Name	24 Washington Street Suite 101 Foxboro CITY anization Affiliated Committee	STATE ▲	ZIP CODE A
Relationship: Connected Org esignated Agent: Identify by Full Name	Suite 101 Foxboro CITY anization Affiliated Committee	STATE ▲	ZIP CODE A
Relationship: Connected Org esignated Agent: Identify by Full Name	Suite 101 Foxboro CITY anization Affiliated Committee	STATE ▲	ZIP CODE A
Relationship: Connected Orgesignated Agent: Identify by Full Name	CITY anization Affiliated Committee	STATE ▲	ZIP CODE A
Relationship: Connected Orgesignated Agent: Identify by Full Name	CITY ▲ anization Affiliated Committee ✓ Journal of the state of the	STATE ▲	ZIP CODE A
Connected Orgesignated Agent: Identify by Full Name	anization Affiliated Committee X Jo	oint Fundraising Represen	
esignated Agent: Identify by Full Name			tative Leadership PAC S
Mailing Address			
L			
L			
TITLE OR POSITION ▼	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
anks or Other Denositories:	List all banks or other depositories in whi	ch the committee depos	its funds, holds accounts, ren
afety deposit boxes or maintain			
ame of Bank, epository, etc.			
Mailing Address			
L			

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h

or(h). Joint Fundraisi	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected Nutmeg DSCC V	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponsor
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Representa	ative Leadership PAC Spons
Full Name Mailing Address	fy by name, address (phone number – optional)		
	1		
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
ITTLE OR POSITION	√		
		Telephone Number	
Banks or Other Deposits safety deposit boxes or m Name of Bank, Depository, etc. Mailing Address	ories: List all banks or other depositories in whi		s funds, holds accounts, rents
Name of Bank, Depository, etc.	ories: List all banks or other depositories in whi		s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BENNET COLOF	RADO VICTORY FUND		
	499 South Capitol St SE		
Mailing Address			
	#407		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected Georgia Senate	l Organization, Affiliated Committee, Joint Fundr Victory 2022	aising Representative	e, or Leadership PAC Spon
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint y Joint y y Joint	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisii		FEC ID number	C
1.		FEC ID number	C
2.			C
3.		FEC ID number	
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Florida Senate Vi	ctory 2022		
Mailing Address	120 Maryland Ave NE		
Mailing Address			
	Washington	l DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE A
	_		_
	Affiliated Committee Affiliated Committee Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
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esignated Agent: Identif Full Name Mailing Address	fy by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ig i ai iioipaiiti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	or Leadershin PAC Snon
DSCC Battlegrou			
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
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